

**MULTIPLE DEDUCTIBLE CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2		/		/		
3	/		/			
4	3			/		
5	0		/			
6	0			/		
7	0			/		
8	0					
9	/		/			
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11	6			/		
12	6			/		
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

	IND.	DEP.	IND.	DEP.	IND.	DEP.
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